



## REQUEST FOR REASSESSMENT

(Fee is non-refundable)

*This request form is used to request a reassessment of the decision received by the Board of Examiners.*

### Instructions & Supplemental Information

1. Complete, sign, and date the request form.
2. Provide a letter addressed to the Board of Examiners (BOE) that briefly states grounds for the reassessment request. State that you are requesting a reassessment based on additional information about your previous experience and/or academic credentials that **was not** included in the initial application.

*Please specify what type of information you will be submitting. The type of information that can be included:*

- **Work Experience Information** – If you are requesting an experience reassessment, we will email you a link to your online experience forms once your request has been approved. **Please do not add experience details to your reassessment letter.**
  - **Academic Credentials Information** – If you are requesting an academic reassessment, all documentation (such as World Education Services Course-by-Course International Credential Advantage report, transcripts, and course descriptions) for academic credentials **must** be provided from official sources.
3. Please email your completed form and supporting documents to [resubmissions@apega.ca](mailto:resubmissions@apega.ca) with the following subject line:

**[Your APEGA ID] Reassessment**

If you are not eligible for a reassessment, your request will be **declined**.

To pay for the request and monitor the progress, please log in to [myAPEGA](#).

If you do not provide sufficient grounds or fail to provide **all** supporting documentation within 90 days of your decision letter, your request will be **declined with no refund**.

Once the Request for Reassessment has been sent for review, the file can take anywhere from **6 – 12 months** to receive a new decision from the Board of Examiners. Please visit our [Application Time Frames](#) for more information.

## REQUEST FOR REASSESSMENT

Personal Information		
Legal Last Name	Full Given Name(s)	Preferred Name
APEGA ID Number		
Email Address		
Daytime Phone Number		
The Reassessment is based on:		
Academics	Work Experience	Academics & Work Experience
<p><b><i>I have included a letter detailing the reasons for my reassessment request.</i></b></p> <p><b><i>I recognize by making this request that the Board of Examiners may make a different decision than the one previously given. I agree to be bound by the new decision.</i></b></p> <p><i>APEGA adheres to the privacy standards under PIPA regarding collection, use, disclosure, and retention of personal information. For a description of APEGA's Privacy Policy, please refer to our website at <a href="http://www.apega.ca/privacy.html">http://www.apega.ca/privacy.html</a>.</i></p> <p><b><i>By signing below, I declare that I am fully aware that any failure to disclose omissions or inaccuracies on this form or in my online work experience submissions may subject me to investigation by APEGA</i></b></p>		
Date: _____ Signature: _____		
Payment Information		
<b>UPDATE FEE (non-refundable)</b>		
Update Fee	<b>\$225.00</b>	
GST (#106728603)	<b>\$11.25</b>	
<b>Total Payable</b>	<b>\$236.25</b>	
<p>After APEGA has received and processed the Request for Reassessment form, we will create an order for the Request for Reassessment. This invoice will be available in your myAPEGA portal for you to complete the payment. Your application <b>will not</b> be processed or sent for review until the payment has been received.</p>		